

WATER WELL REPORT

STATE OF WASHINGTON

Start Card No. **43923**

33/1124G

Water Right Permit No. _____

(1) OWNER: Name **J. TRASK** Address **3063 N. OAK HARBOR RD 98277**

(2) LOCATION OF WELL: County **ISLAND** SW ☒ NE ☒ Sec. **24** T. **33** N. R. **1E** W.M.

(2a) STREET ADDRESS OF WELL (or nearest address) **3325 Wilson Rd - OAK HARBOR WA.**

(3) PROPOSED USE: ☒ Domestic ☐ Industrial ☐ Municipal ☐
☐ Irrigation ☐ Test Well ☐ Other ☐
☐ DeWater

(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information.

(4) TYPE OF WORK: Owner's number of well (if more than one) **2**
Abandoned ☐ New well ☒ Method: Dug ☐ Bored ☐
Deepened ☐ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☐ Jetted ☐

(5) DIMENSIONS: Diameter of well **6** inches.
Drilled **129** feet. Depth of completed well **129** ft.

(6) CONSTRUCTION DETAILS:

Casing installed: **6** Diam. from **0** ft. to **124** ft.
Welded ☒ Diam. from _____ ft. to _____ ft.
Liner installed _____ Diam. from _____ ft. to _____ ft.
Threaded ☐ Diam. from _____ ft. to _____ ft.

Perforations: Yes ☐ No ☒

Type of perforator used _____

SIZE of perforations _____ in. by _____ in.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

Screens: Yes ☒ No ☐

Manufacturer's Name **COOK**

Type **STAINLESS**

Model No. _____

Diam. **6** Slot size **10** from **124** ft. to **129** ft.

Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Gravel packed: Yes ☐ No ☒ Size of gravel _____

Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes ☒ No ☐ To what depth? **10+** ft.

Material used in seal **BENTONITE**

Did any strata contain unusable water? Yes ☐ No ☒

Type of water? _____ Depth of strata _____

Method of sealing strata off _____

(7) PUMP: Manufacturer's Name _____

Type: _____ H.P. _____

(8) WATER LEVELS: Land-surface elevation above mean sea level **120** ft.

Static level **105** ft. below top of well Date **7-92**

Artesian pressure _____ lbs. per square inch Date _____

Artesian water is controlled by _____ (Cap, valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level

Was a pump test made? Yes ☐ No ☒ If yes, by whom? _____

Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.

_____ " " " " " " " " " " " "

_____ " " " " " " " " " " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time Water Level Time Water Level Time Water Level

_____ " " " " " " " " " " " "

_____ " " " " " " " " " " " "

Date of test _____

Boiler test **10** gal./min. with **7** ft. drawdown after **3** hrs.

Airtest _____ gal./min. with stem set at _____ ft. for _____ hrs.

Artesian flow _____ g.p.m. Date _____

Temperature of water _____ Was a chemical analysis made? Yes ☐ No ☒

Work started **7** 19**92** completed **7-7** 19**92**

WELL CONSTRUCTOR CERTIFICATION:

I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

NAME **WHIDBEY DRILLERS**
(PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)

Address **OAK HARBOR**

(Signed) **Donna Ehl** License No. **129**
(WELL DRILLER)

Contractor's Registration No. **WHID209MM** Date **7-7** 19**92**

(USE ADDITIONAL SHEETS IF NECESSARY)

